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State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

to Appropriate District Office OIL CONSERVATION DIVISION **DISTRICT I** WELL API NO. P.O. Box 1980, Hobbs, NM 8824U P.O. Box 2088 30-025-27969 Santa Fe, New Mexico 87504-2088 5. Indicate Type of Lease P.O. Drawer DD, Artesia, NM 88210 STATE X FEE __ DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 6. State Oil & Gas Lease No. B-1565 SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" CENTRAL VACUUM UNIT (FORM C-101) FOR SUCH PROPOSALS.) 1. Type of Well: MEIT WELL OTHER WATER INJECTION 8. Well No. 2. Name of Operator Texaco Exploration and Production Inc. 9. Pool name or Wildcat 3. Address of Operator VACUUM GRAYBURG SAN ANDRES P. O. Box 730 Hobbs, NM 88240 4. Well Location 100 Feet From The NORTH Line : 1310 Feet From The Line and County 34-E **NMPM** 17-S Range Township 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4009' GR Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. SUBSEQUENT REPORT OF: NOTICE OF INTENTION TO: PLUG AND ABANDON **ALTERING CASING** REMEDIAL WORK PERFORM REMEDIAL WORK PLUG AND ABANDONMENT L COMMENCE DRILLING OPNS. **CHANGE PLANS TEMPORARILY ABANDON** CASING TEST AND CEMENT JOB **PULL OR ALTER CASING** X OTHER: ADDED PAY AND ACIDIZE OTHER: 12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103. 9/7/93 - 9/10/93 1. MIRU. TOH W/ INJ EQUIP. C/O TO 4761'. 2. PERFD 4 1/2" CSG W/ 2 JSPF FR 4412'-4500', (51 INT, 102 HLES). 3. ACIDIZED PERFS FR 4412'-4730' W/ 6350 GALS 20% HCL NEFE, MAX P = 2700#, AIR = 3 BPM. SWABBED BACK LOAD. 4. CIRCD HLE W/ PKR FLUID, SET PKR @ 4356', TSTD CSG TO 570# FOR 30 MIN, OK. RETURNED WELL TO INJECTION (ORIGINAL CHART ATTACHED, COPY OF CHART ON BACK) OPT 8/28/93 968 BWPD @ 1200 PSI I hereby certify that the information above he true and complete to the best of my knowledge and belief. TITLE _ENGINEER'S ASSISTANT DATE 10-6-93 TELEPHONE NO. 393-7191 TYPE OR PRINT NAME MONTE C. DUNCAN (This space for State Use) Orig. Signed by Paul Kautz OCT 08 1993 Geologist TILE APTROVED BY ..

CONDITIONS OF APPROVAL, IF ANY:

